Public Health Education Collaborative



June 1st, 2010

Welcome

Sylvia Estafan

Health Education Administration



... Your one-stop shop for all your health education needs.





Introductions

- Name
- Title
- Organization





Housekeeping

- Bathrooms
- Sign-in/Sign-out
- CHES credits
- CEUs
- Evaluations
- Food





Ground Rules

- Turn cell phones to silent or vibrate
- Respect cell phone use
- Respect time
- Raise hands for questions/comments
- Respect one another
- Parking lot
- Agree to disagree





Meeting Overview



Jackie Valenzuela

Health Education Administration





Morning Agenda

Timeframe	Content	Process	Who
9:00am-9:05am	Welcome and Introductions	Remarks and Round-Robin	Sylvia Estafan Health Education Administration
9:05am-9:15am	Meeting Overview	Update and Review Meeting Minutes	Jackie Valenzuela Health Education Administration
9:15am-11:00am	Healthy Weight Training	Training and Discussion	Eleanor Long Maternal, Child, and Adolescent Health Program
11:00am-11:15am	Wellness Break	Activity	Erika Siever Health Education Administration
11:15am-12:00pm	DPH Wellness Updates	Presentation and Discussion	Susan Lesser Health Education Administration
12:00pm-1:00pm	Lunch	On Your Own	All





Afternoon Agenda

Timeframe	Content	Process	Who
1:00pm-2:30pm	Preventing Childhood Poisoning	Presentation and Discussion	Lupe Gonzalez-Hernandez Esperanza Community Housing Corporation
2:30pm-2:45pm	Wellness Break	Activity	Erika Siever Health Education Administration
2:45pm-3:45pm	The Role of Health Educators at the Office of AIDS Programs and Policies	Presentation and Discussion	Michael Squires Office of AIDS Programs and Policies
3:45pm-4:00pm	Wrap-Up & Evaluation	Q & A, Evaluation completion	Sylvia Estafan Health Education Administration





Today's Key Objectives

By the end of this session, participants will be able to...

- 1. List the goal and strategies of the Healthy Weight Training.
- 2. List the components of the Countywide Fitness Challenge.
- Identify at least two ways you can participate in the Countywide Fitness Challenge.
- Describe at least two services provided by the Esperanza Community Housing Corporation.
- Describe the function of the Poison Control Center.







Achieving and Maintaining a Healthy Weight An Evidence-Based Curriculum

Eleanor P. Long, MSPH

Los Angeles County Department of Public Health, Maternal, Child, and Adolescent Health





Seven 30-Minute Sessions

- Can be implemented in any setting
- Tools included with instructions
- Lectures pre-planned
- Evaluation included





Why Healthy Weight?

- Obesity Epidemic
- Childhood obesity on rise
- Difficult to change behaviors
- Need to establish social support
- Must act responsibly to create health





Defining Overweight and Obesity

- Obesity is defined by the World Health Organization (WHO) as a condition in which excess body fat has accumulated to an extent that can cause health problems (1).
- Overweight and obesity result from an excess of caloric energy intake and increase of physical inactivity.
- An adult is considered overweight if they have a Body Mass Index (BMI) of 25 or more (2).
- An adult is considered obese when they have BMI of 30 or more (2).



Defining Overweight and Obesity



 A woman who is 5'4" and weighs 146 to 174 pounds is considered overweight.

 The same woman who weighs 174 pounds or more is considered to be obese.



Overweight and Obesity Facts

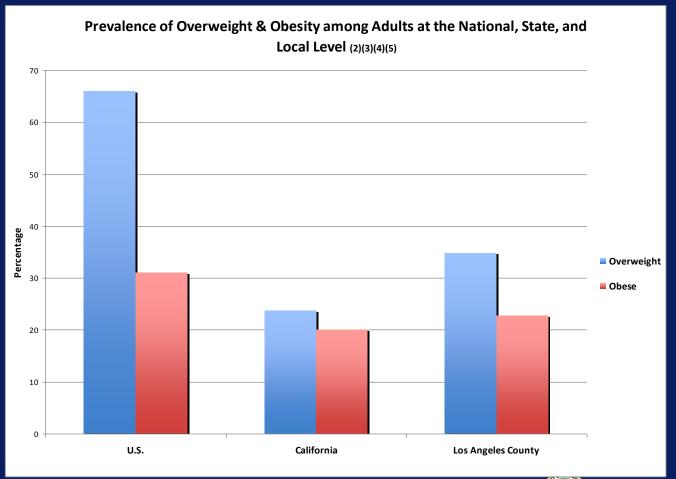
• Worldwide, in 2005, at least 400 million adults were obese and this number is expected to increase to 700 million by 2015₍₁₎.







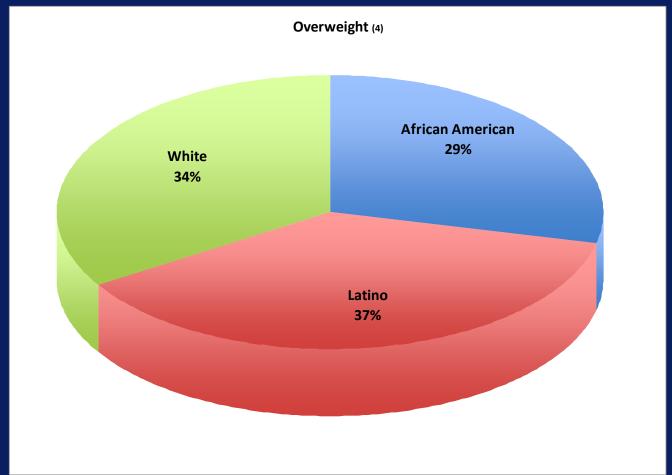
Prevalence of Overweight and Obesity Among Adults





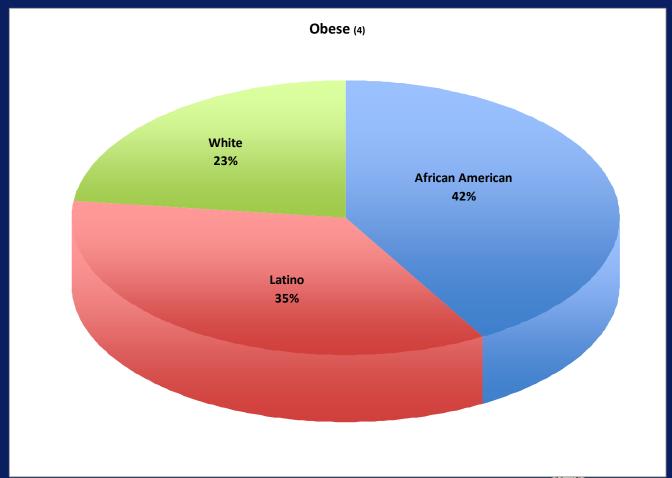


Overweight Rates among Adults in Los Angeles County





Obesity Rates among Adults in Los Angeles County





Legacy of Obesity

 Children who are born to obese mothers are more likely to be high birth weight and

• are twice as likely to become obese and develop type 2 diabetes later in life (6).





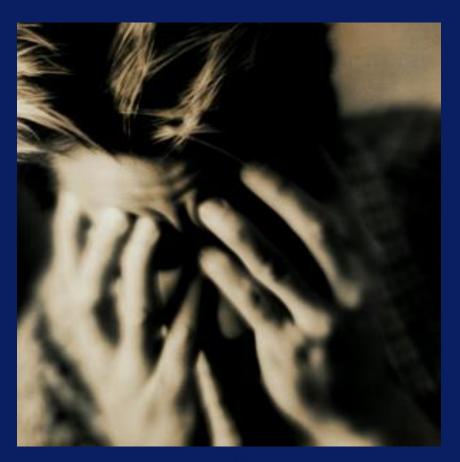


The Cost of Obesity in US

300,000 deaths/year (7) (second to tobacco)

\$117 billion/year (7)

- \$61 billion in direct costs, including healthcare
- \$56 billion in indirect costs, including lost of productivity and earning lost







What are the factors associated with obesity? Our Culture!!

- Stress
- Unhealthy diet
- Lack of exercise
- Low-income status
- Sedentary lifestyle
- Advertising unhealthy foods
- Unhealthy "fast" foods are cheap
- Healthy "fast" foods are more expensive







Overweight Leads to Costly Health Problems

- Heart disease
- High blood pressure
- Type 2 diabetes
- Certain cancers
- Respiratory difficulties
- Skin problems
- Chronic musculoskeletal problems
- Infertility(3)







Healthy Weight Curriculum Purposes



• To Improve the lifestyle of Los Angeles County families.

• To Connect families with agencies that will help them enroll in Medi-Cal and Healthy Families.





Overall Objectives of the Healthy Weight Curriculum

- Participants will learn ways to maintain a healthy lifestyle through exercise, diet and social support.
- Participants will be able to identify situations for potential overeating and use effective coping strategies.
- Participants will be encouraged to establish the social support needed for continued success.
- Participants will be aware of agencies that can help eligible families enroll in Medi-Cal/ Healthy Families.





Steps to Success for Educators How to Begin

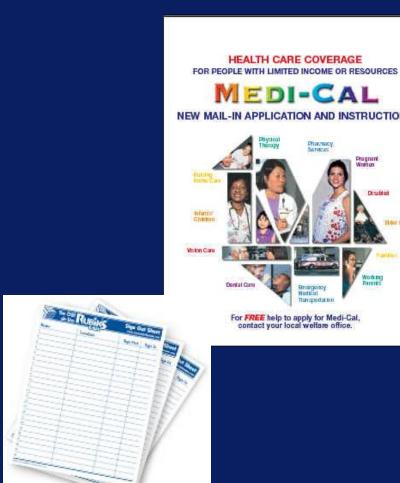
- Meet with opinion leaders that might influence the success of your program.
- Reach out and meet with the people that might be participants in your program.
 - Find out their needs and what they want.
 - Make meeting their needs your priority.
- Arrange for childcare during sessions (*even if you have to charge parents for the service*)





General Format for Sessions

- Begin and end on time.
- Include an icebreaker.
- Review what you are going to teach
- Use self-assessments.
- Use dyads and small group activities to encourage sharing.
- Monitor time, keep on track
- Review what you taught
- Preview next session







Sessions – Each 30 minutes

- Session 1: Getting Started on the Path to a Healthy Weight
- Session 2: Making Healthy Habits
- Session 3: Getting Social Support
- Session 4: Dealing with Difficult Situations
 Causing Overeating and Stress
- Session 5: Understanding Food Labels
- Session 6: Building Exercise into Every Day
- Session 7: Maintaining Healthy Habits for Life





- Agree on Ground Rules post at every session
- Teach in teams one person keeps time
- Preview each session ('tell what you are going to teach')
- Use diads to create movement Stages of Change
- Review at end and preview for next session





- 1-A: Establish Ground Rules
- 1-B: Overview of Program
- 1-C: Pre-test Sets the stage for what will be learned
- 1-D: Introduction to Medi-Cal enrollment assistance
 - All people need medical insurance.
 - Many families become discouraged with the paperwork involved in enrolling for federal and state assistance
 - Public Health Department provides "safety net"





- 1-E: Readiness to Change Self-Assessment
- 1-F: Educator explains the Stages of Change Model
 - 1. Pre-contemplation:
 - 2. <u>Contemplation</u>
 - 3. Preparation:
 - 4. Action:
 - 5. Maintenance:
 - 6. Relapse:





Suggestions on how to move from where you are to action!

• Pre-contemplation:

- Get more information
- What are the facts?
- What will happen if I don't change?

Contemplation:

• Weigh the pro and cons, is there even one thing I can do?

• Preparation:

- Set healthier goals
- Identify what might create failure

• Action:

- What is your plan?
- What will you do when faced with cues to unhealthy eating?
- How will you handle relapse

Maintenance:

Establish social support and new habits

• Relapse:

• What needs to be changed to be healthy again?





 1-G: Form dyads (dyads = 2 people working together) to discuss where they are in the model and how they intend to move to the Action Phase.

1-H – Review and Preview





Session 2: Making Healthy Habits

- These behaviors research-based
- Establishing habits essential
- Choose one behavior at a time for change
- Save brochure for future next habit





Session 2: Making Healthy Habits

Brochure useful tool

Have extra copies to take home

• Encourage class to use brochure with friends & family

• Teach what you most want to learn!!





Session 2: Making Healthy Habits

Build Self-Awareness:

Begin Food Diaries

• Begin Exercise Tracking

Encourage social support from beginning!





Session 3:

Creating Goals: Goals help you clarify what you want to do.

SMART goals are:

S = specific

M = measurable

A = achievable

R = relevant

T = time-bound





Session 3: Making Habits & Getting Social Support

• Encourage Self-Awareness

Model Patience and Persistence

• Now is the time to begin (and begin again and again)

• Teach positive self-talk – re-framing





Session 3: Making Habits & Getting Social Support

• Food Diaries – give only praise and encouragement

Awareness is the first step to change

Social Support is key to success





- Monitor self-talk Change your thinking
- Find the "good" in a "bad" situation
- Avoid the "blame game"





Culture that sells products

Farm policy that pushes corn

• Product placement (stores and media)

• Easy access to fast (cheap) foods





• Self-awareness of situations that are stressful

- Uncover true emotions (pain/boredom/anger)
- Comfort foods mindless eating

• Have a plan - Rehearse new behaviors

Have a buddy





• Have class look for Environmental Cues

Encourage discussions outside of class – BUT
 ONLY with supportive friends/family

• Have class bring labels from their "usual" foods to next class





Session 5: Understanding Food Labels

• First mention of "calories"

• Practice with labels of "usual" foods

Stick to lecture – Hand-outs to be studied

 Encourage discussions with other class members and exploration on Google Scholar





Session 5: : Understanding Food Labels

Become conscious of what you buy

Avoid certain ingredients

Portions Count – and Count those calories

• Buy fresh – learn simple cooking skills





Session 5: Understanding Food Labels

Relate to information in Food Diaries

 Hand-out to be studied at home and with class mates

• Encourage discussion of healthy substitutes, meal planning, shopping lists, recipes, ...with buddies





Session 6: Building Exercise into Every Day

- Habits essential
- Social Support essential

• Begin planning for activities to maintain momentum after class ends!

Ideal time to form Exercise Groups





Session 6: Building Exercise into Every Day

 Continue to encourage exercise logs and food diaries

• Make exercise a daily habit

• Link exercise with quality time with friends and family





Session 6: Building Exercise into Every Day

• Exercise must be combined with counting calories to lose weight!!

• Calories In \Leftrightarrow Calories Out





Session 7: Maintaining Progress

- Individual Responsibility plus
- Social Support plus
- A determination to create healthy habits





Session 7: Maintaining Progress

Group plans to maintain progress

Post-test and Participant Evaluation

Agreement to track long-term effects





Session 7: Maintaining Progress

Wrap-Up!

- Reminders
 - Calorie counts
 - Social Support
 - Exercise Regularly
 - If you slip, forgive yourself and begin again





References

- (1) World Health Organization (WHO). (2010). Obesity and Overweight Facts. Retrieved from http://www.who.int/dietphysicalactivity/publications/facts/obesity/en/
- (2) Centers for Disease Control and Prevention (CDC). (2009). Defining overweight and obesity. Retrieved from http://www.cdc.gov/obesity/defining.html
- (3) National Institutes of Health (NIH). (2009). National heart lung and blood institute: why obesity is a health problem. Retrieved from http://www.nhlbi.nih.gov/health/public/heart/obesity/wecan/
- (4) California Health Interview Survey (CHIS). (2010). Retrieved from http://www.chis.ucla.edu/main/DQ3/output.asp
- (5) California Health Interview Survey. African American Origin 2005. Available at http://www.chis.ucla.edu/main/DQ2/output.asp accessed November 13, 2008.
- (6) Centers for Disease Control and Prevention (CDC). (2009). Maternal and Infant Health Research: Pregnancy Complications. Retrieved from http://www.cdc.gov/reproductivehealth/maternalinfanthealth/PregComplications.htm# obesity
- (7) Office of the Surgeon General. (2010). Overweight and Obesity: At a Glance. Retrieved from http://www.surgeongeneral.gov/topics/obesity/calltoaction/fact_glance.html





Wellness Activity



Erika Siever

Health Education Administration



DPH Wellness Updates

Susan Lesser

Health Education Administration





Countywide Fitness Challenge 2010

- Five-Month Campaign (June to October)
- DHR & Insurers

Components

- "Play for Life"
- Biggest Loser
- Pound for Pound
- Start! Walking





Play for Life

- Health Fairs
- Farmers' Markets
- Water SafetyClasses
- Nature Hikes







The Biggest Loser

- 8-week contest
- By June 4th Biggest Loser teams should:
 - Identify up to 15 members
 - Choose a Team Captain
 - Designate a team
 member who will bring
 in a scale for each
 weigh-in







The Biggest Loser Team Captain Responsibilities

- Team Captain responsibilities will include:
 - Entering weigh-in information
 - Performing weigh-ins for team members
 - Reporting total team weight
 - Motivating their teammates!







The Biggest Loser Pound for Pound

- Raise money for the hungry as you lose weight
- Easy
- Quick







The Biggest Loser Wellness Coordinators' Role

- Spread the word
 - Post flyers
- Encourage colleagues to form teams and designate a Team
 Captain
- Provide support
- Chronicle your team's struggles and success







The Biggest Loser 1st Weigh-In How To

- Week of June 7, 2010:
- Go to website
- Department Name
- Team Name
- Number of team members
- Total team weight as of initial weigh-in
- Pound for Pound reminders

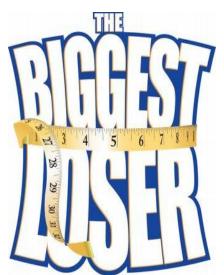






The Biggest Loser Mid-Point Weigh-In How To

- On July 6th
- Go to website
- Department Name
- Team Name
- Number of team members
- Total team weight as of July 6, 2010
- If your team participated in the Pound for Pound Challenge, how many total pounds did your team pledge?







The Biggest Loser Weight-Out How To

- On August 3rd
- Go to website
- Department Name
- Team Name
- Number of team members
- Total team weight as of August 3, 2010
- Total team weight loss percentage







The Biggest Loser Prizes

- Trophy and Board Scroll to the winning department
- A surprise prize to the winning DPH team







The Biggest Loser Disclaimer

Do not participate if you are pregnant or if weight loss is not appropriate for you.





Start! Walking Now

- American Heart Association
- Free online tracking system
- Participation will be tracked
- No incentives will be provided
- Data reported directly to DHR

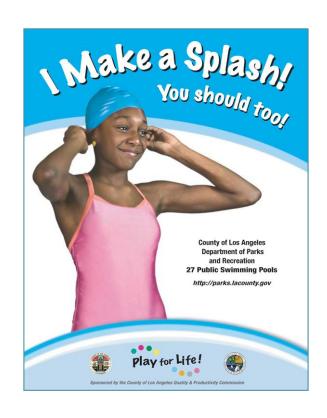






Wellness Coordinators' Roles

- Events near your office?
- Encourage colleagues to participate
- Let Kim or Susan know:
 - If you attend an event
 - If you need any assistance
- Report activities in your monthly logs

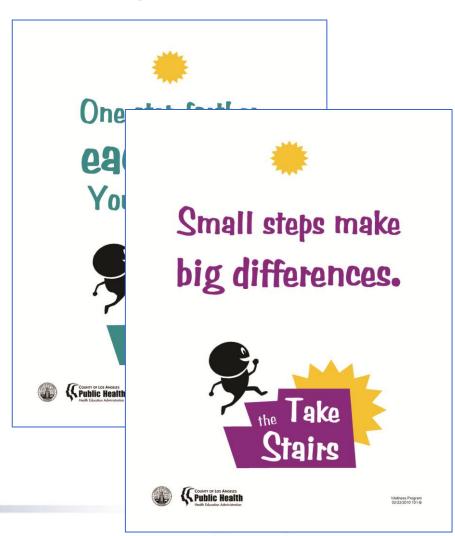






DPH Wellness Update: Stairwell Prompts

- Laminated signs have been approved by Dr.
 Fielding and are being ordered
- Electronic 8 ½ x 11
 versions will be posted
 on intranet site



DPH Wellness Update: New Wellness Flyers

- Setting and Reaching Wellness Goals
- Gentle Stretching Exercises
- Strength Training Exercises
- Wellness @ Work
- Walking for Wellness

setting & reaching wellness goals



When aiming to improve your overall health and well-being, it's a good idea to define your goals. Take a look at what you want to accomplish, then figure out how you'll carry out your plan.

Listing your goals will help you to monitor your progress and enjoy your success. Set *short-term* and *long-term* goals using the worksheet on the back of this flyer. Your goals should be S-M-A-R-T:

- S Specific
- M Measureable
- A Attainable
- R Relevant
- T Time-Based

For example, a **specific** short-term goal might be to start walking 5 miles per week; the long-term goal might be to achieve a healthy weight. This goal is easily **measurable**: have you or have you not begun walking? This is an **attainable** goal: walking is free, easy, and can be integrated into your weekly routine. This goal is **relevant** to living a long, healthy life. Finally, make sure that your goals are **time-based**: for example, you might plan to start your walking program within the next 3 days.



Wellness Program

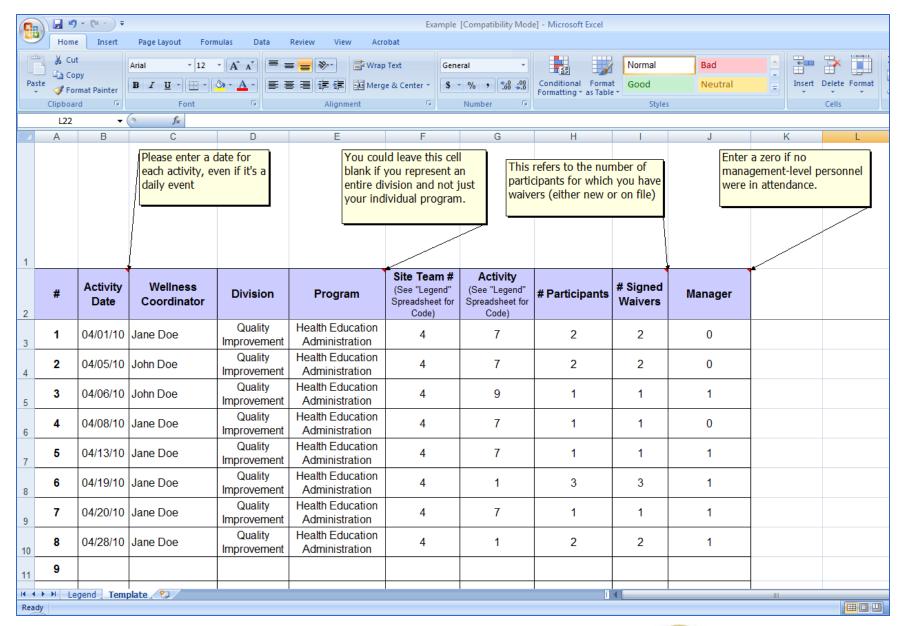




DPH Wellness Update: Monthly Reporting Logs

- For activities that are led or coordinated by Wellness Coordinators in the workplace; and/or group activities in the workplace that involve more than one participant
- Each activity needs to be listed on its own line; that means that if you coordinate a walk daily, each day needs its own line with its own data









DPH Wellness Update: Monthly Reporting Logs

May logs are due on June 11th

• *Thank You* for continuing to submit!

Los Angeles County Department of Public Health
Wellness Committee
2010 Monthly Log Submission Schedule

Reporting Period	Log Due
January 2010	Friday, February 5 th 2010
February 2010	Friday, March 5 th 2010
March 2010	Friday, April 9 th 2010
April 2010	Friday, May 7 th 2010
May 2010	Friday, June 11 th 2010
June 2010	Friday, July 9 th 2010
July 2010	Friday, August 6 th 2010
August 2010	Friday, September 10 th 2010
September 2010	Friday, October 8 th 2010
October 2010	Friday, November 5 th 2010
November 2010	Friday, December 10 th 2010
December 2010	Friday, January 7 th 2011

Contact: Kim Harrison Eowan, kiharrison@ph.lacounty.gov





DPH Wellness Update: Next Committee Meeting

- 8/3/2010 at the California Endowment ©
- Remaining 2010 Wellness Committee Meetings:
 - 8/3, 10/5, 12/7*
- Other PHECs:
 - 7/6, 9/7, 11/2





^{*}holiday celebration

Lunch







Poison control

ESPERANZA COMMUNITY HOUSING CORPORATION June 1, 2010

JESÚS GARCÍA

Don't Guess Be Sure

- The more we know about poisonings, the better we can prepare ourselves.
- Poisoning can happen anytime at home, work, school and other unexpected places.
- The world is filled with natural and man-made substances that can cause poisonings.



Poison Control cont'...

- Today we will share about poisoning, how to avoid them, and what to do when poisoning takes place.
- Always look out for chemicals, cleaning products, plants, medicines, spoiled food, spiders, insects, pesticides, and fertilizers.
- This are just some of the things that can cause accidental poisoning.



Why children between o-5 years are at greater risk for poisonings?

- Develop new abilities (grasping, grabbing, reaching, climbing) are always exploring.
- Put things in their mouths
- Don't always learn form their experiences
- Like to imitate adults-especially if they see you taking medicine
- Do not yet have good sense of taste and smell



The most common things kids see at home

- Personal care products
- Cleaning products
- Fertilizers/Pesticides
- Medicines
- Plants

Personal care products are:

- Oral Hygiene (toothpaste, mouthwash)
- Perfumes/Colognes/Aftershave
- Hair care (shampoo, chemical relaxers, hair spray)
- Make up (lip stick, powdered, nail)
- Nail Care (nail polish, polish remover)



Why children like this products?

- They are often left in easy-to-reach places
- They may see you put on make-up, brush your teeth, or use mouthwash. Kids tend to imitate adults(*every child wants to be just like their parents, brothers, sisters, etc.*)
- They are bright in color and smell good

Cleaning Products

- Soaps
- Detergents
- Sprays
- Pesticides
- Painting supplies
- Car products



Why do clean products attract children?

- Bright in color and can not read information
- The pine oil cleaners look like juice
- Can not tell difference between white bleach bottle and full plastic bottle of milk
- Window cleaner looks like mouthwash
- After shave looks like whip cream
- Motor oil looks like honey
- Many cleaning products smell fruity



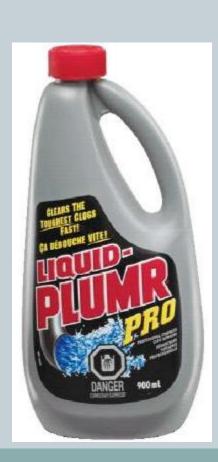
Mixing cleaning products

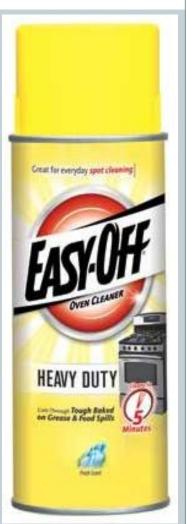
- Mixing bleach products with ammonia, makes very dangerous gases.
- The gases can cause runny itchy eyes, stuffy nose, sore throat, cough, and breathing problems.
- Mixing bleach with dish soap can create harmful gases.



Clean products that can burn the skin, eyes, lips, tongue and stomach.

- Jewelry cleaners (acetone)
- Oven cleaners (easy-off)
- Drain openers
- Mildew removers
- Stain removers
- Toilet bowl removers





How can you prevent poisoning

- Keep clean products in original containers
- Lock products in a secure place
- Out of reach of children
- Keep them away from food or drinks
- Do not leave products unattended



Pesticides

- Wear gloves and clothes that cover all your skin when applying pesticides.
- Wash fruits and vegetables from the field before eating them.
- Clean the floors of your home and wash toys frequently
- If possible avoid using pesticides.
- Use water, baking soda, lemon, vinegar

Medicines causes most of the serious poisoning in children

- Pain relievers (Tylenol, Advil, and Aspirin)
- Giving the wrong amount
- Medicines from other countries
- Some have a lot of lead in them
- Left unattended by the family



How to disposed medicine safely

- Wrap bottles in heavy wrapper
- Put in trash so children and pets will not find them.
- Crush tablets and capsules with water and throw away.
- Remember to always take off the label with your name before throwing it away.

Plants that are NOT safe

- Weed
- Ornamental Peppers
- Peace Lily
- Tulip bulbs
- Calla Lily
- Iris

NOTE: To obtain a complete list of the SAFE VS NOT SAFE PLANTS please visit the California Poison Control Website at:

www.calpoison.org

Under "Search Cal Poison" enter the keyword "Plants"





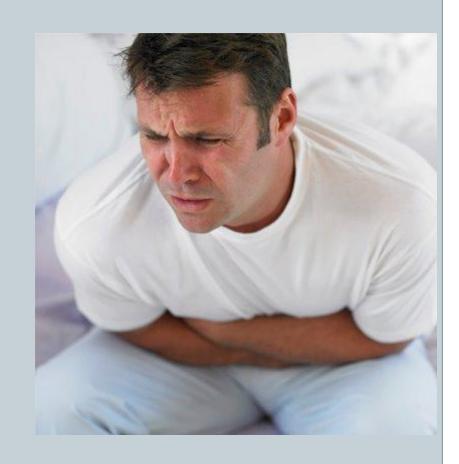
Mushrooms

- Many people are poisoned by mushrooms every year in California and most of these are children under 6 years old. Poisonous mushrooms can cause a person to throw- up and make the liver or kidneys stop working.
- Always eat mushrooms that you bought from the grocery.



Food Poisoning

- Is a BIG problem in California
- Not cooking food well enough
- Not storing food safely
- Not washing hands while making food
- This can lead to stomach pain and diarrhea.



How to stop food Poisonings

- By always washing hands and keeping your hands clean in the kitchen.
- Important to cook meats, fish and eggs entirely.
- Make sure to clean counters after using these foods to prevent food poisoning



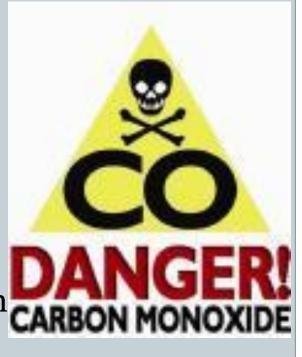
Insects and spiders

- Do not leave food, drinks or garbage out
- Shake all shoes, clothing before wearing.
- If you are allergic to stings or bites, ask your doctor what you need to do in case of an emergency.
- Bright colors with flowers attracts insects
- Don't keep snakes as pets
- Teach children to leave snakes alone



Carbon Monoxide Poisoning

- Have your company look at your furnace.
- Have your appliances installed and serviced by a professional.
- Never burn charcoal inside your house.
- Never use a gas range oven to heat room.
- Never leave a car running in a garage.
- Installed a carbon monoxide detector in carbon monoxide your home.

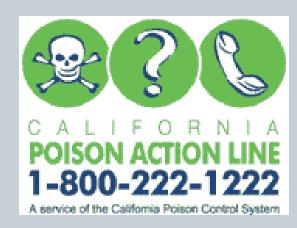


Keep your family safe from poisonings

- Keep the number 1-800-222-1222 on or near all phones.
- Keep medicines, cleaning products out of reach of children and locked cabinets.
- Always keep products in original containers.
- Do not store food and household cleaners in the same cabinets.
- Never call medicine candy or take medicine in front of children.

California Poison Action Line

- It is a public service of the California Poison Control System
- Call are handle quickly, accurate, professionally and free-of-charge.
- 24 hours a day, 7days a week, interpreting service for over 100 languages, and a line for the hearing and speech impaired.
- www.calpoison.org



The difference

California Poison Control System 2009





STATISTICS

- Nearly 4 million cases have been managed since the California Poison Control System's inception in 1997.
- Over 300,000 poisoning cases are consulted on annually, nearly 900 cases every day.
- \$70 million in health care costs are saved and 61,000 emergency room visits averted annually in California through CPCS telephone consultation.
- 51% of all poison exposures involve children five years and younger.
- 94% of poison exposures occur in the home.
- 78% of poison exposures are treated at home with help from the CPCS.
- 20% of calls are from consumers seeking advice on prevention and safety.
- 17% of calls originate from a healthcare facility or medical professional and require specialized toxicology consultations.

STORIES

Have you ever drunk from the wrong Cup accidentally?

"I thought I'd swallowed chlorine bleach and panicked—for myself and for my 9-month-old baby who was breastfeeding regularly. Thank heavens I called Poison Control! With great compassion the person answering assured me there was no real danger and calmly, clearly explained what to do. I was so grateful."

"My 4-year-old somehow opened a childproofed vitamins bottle and swallowed an unknown number. I called Poison Control. The kind rep helped me estimate the dosage and contents, and reassured me that my child was not in mortal danger. She also described symptoms to watch for, just in case, and called back an hour later to make sure my little girl was okay. I couldn't have hoped for better treatment."

"As an ER nurse at a community hospital for 14 years, I don't know what we would do without the California Poison Control System's services. I personally am frequently in contact with the CPCS, sometimes with questions about a patient's poison ingestion, and other times getting a heads-up about someone heading our way who had been poisoned or potentially poisoned and how to treat it."

Don't Guess. Be Sure

- Parents receive immediate treatment advice from a poison expert:
- Clinical Pharmacist
- Physicians
- Registered Nurses
- Poison Information Providers

Don't Guess Be Sure

You can call with questions or when you are not sure.

The Poison Control Center will ask:

- 1. What happen?
- 2. What was it?
- 3. How much?
- 4. When?
- 5. How does the person look and feel
- 6. How old is the person
- 7. What do they weigh?
- 8. Will take your phone number, call back to assure you are ok.
- 9. Poison Control Center Staff will then tell you what to do –step by step.

Thank you for your attention

• Questions/Answers.

Wellness Activity



Erika Siever

Health Education Administration

The Role of Health Educators at the Office of AIDS Programs and Policy (OAPP)

Mario J. Pérez, Director, OAPP

Jennifer Sayles, M.D., M.P.H., Medical Director, OAPP

Public Health Education Collaborative Meeting
June 1, 2010

Presented by Michael Squires, MPH



For More Information

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http://publichealth.lacounty.gov/aids/index.htm
(for training calendar and descriptions of training)



Upcoming Collaboratives

Date	Time	Location	Content
July 6 th , 2010	9am – 4pm	California Endowment 1000 N. Alameda Ave, LA 90012	AM: Program Updates PM: PM & SB Committees
August 3 rd , 2010	9am – 4pm	California Endowment 1000 N. Alameda Ave, LA 90012	AM: Wellness Committee PM: Professional Development





Wrap-Up & Evaluations

Sylvia Estafan

Health Education Administration



Thank You!

